16793975

Application or Docket Number

|                                  | Effective October 1, 2003  |   |                     |  |                                 |                    |                  |                         |  |                     |                         | J                      |  |  |
|----------------------------------|--|---|---------------------|--|---------------------------------|--------------------|------------------|-------------------------|--|---------------------|-------------------------|------------------------|--|--|
|                                  | CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |   |                     |  |                                 |                    |                  |                         | SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY |                     |                         |                        |  |  |
| ]] ]                             | OTAL CLAIM:  | S ·.  | 768                 |  |                                 |                    | . [ [            | RATE                    | FEE  | 7                   | RATE                    | FEE                    |  |  |
| F                                | OR   |   | NUMBER FILED        |  | NUMBER EXTRA                    |                    | ВА               | SIC FEE                 | 385.00                                       | OR                  | BASIC FEE               | 770.00                 |  |  |
| Ţ                                | OTAL CHARGE  | ABLE CLAIMS                                       | 768 minus 20=       |  | • 748                           |                    | , ,              | (\$ 9 <sub>=</sub>      | 6732   | OR                  | X\$18=                  |                        |  |  |
| $\vdash$                         | DEPENDĖNT (  |   | 24 minus 3 =        |  | 21                              |                    | 7                | (43=                    | 903."  | OR                  | X86=                    | • •                    |  |  |
| M                                | ULTIPLE DEPE   | · · · · · · · · · · · · · · · · · · ·             |                     | +  | 145=                            |                    | OR               | +290=                   |  |                     |                         |                        |  |  |
| * 1                              | * If the difference in column 1 is less than zero, enter *0° in column 2 |   |                     |  |                                 |                    |                  | OTAL                    | 8020,  | OR                  | TOTAL                   |                        |  |  |
|                                  |  | CLAIMS AS A                                       | MENDE               | ED - PART II (Column 2) (Column 3)             |                                 |                    |                  | MALL I                  | ENTITY                                       | OR                  | OTHER<br>SMALL          |                        |  |  |
| AMENDMENT A                      |  | CLAIMS .<br>REMAINING<br>AFTER<br>AMENDMENT       | ·                   | HIGHE<br>NUME<br>PREVIO<br>PAID F              | ST<br>IER<br>USLY               | PRESENT<br>EXTRA   | P                | ATE                     | ADDI-<br>TIONAL<br>FEE                       |                     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |  |
| Ž                                | Total  | .768  | Minus               |  |                                 | =748               | ×                | \$ 9=                   | 67320  | Ъπ                  | X\$18=                  | 1                      |  |  |
| AME                              | Independent  | . 24  | Minus               |  |                                 | =2/                | ×                | 43=                     | 9030   | OR                  | X86=                    |                        |  |  |
| L                                | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |                     |  |                                 |                    |                  |                         | - K  | OR                  | +290=                   |                        |  |  |
| TOTAL 8/1 20/2000 TO             |  |   |                     |  |                                 |                    |                  |                         |  |                     | TOTAL<br>ADDIT. FEE     |                        |  |  |
| (Column 1) (Column 2) (Column 3) |  |   |                     |  |                                 |                    |                  |                         |  |                     |                         |                        |  |  |
| AMENDMENT B                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT         | ·                   | HIGHE<br>NUMB<br>PREVIO<br>PAID F              | ER<br>USLY                      | PRESENT ,<br>EXTRA | R                | ATE                     | ADDI-<br>TIONAL<br>FEE                       |                     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |  |
| NON                              | Total  |   | Minus               | **   | ·                               | =                  | ×                | 9=                      |  | OR                  | X\$18=                  |                        |  |  |
| AME                              | Independent  | NTATION OF MU                                     | Minus               | ENDENT   | CL AISA                         | =                  | Х                | 43=                     |  | OR                  | X86=                    |                        |  |  |
|                                  |  | TATOM OF MO                                       | ·                   |  | S D X I WI                      |                    | +1               | 45=                     |  | OR                  | +290=                   |                        |  |  |
| •                                | •  | •   |                     |  |                                 |                    | TOTAL<br>T. FEE  |                         | OR ,   | TOTAL<br>ADDIT, FEE |                         |                        |  |  |
|                                  |  |   |                     |  | ٠.                              | (Column 3)         |                  | •                       |  |                     |                         |                        |  |  |
| ,                                |  | (Column 1)  |                     | (Colum   |                                 | 100181111101       |                  |                         |  |                     |                         |                        |  |  |
| C                                |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT       |                     | (Colum<br>HIGHE<br>NUMBI<br>PREVIOL<br>PAID FI | ST<br>FR<br>ISLY                | PRESENT<br>EXTRA   | RA               | TE.                     | ADDI-<br>TIONAL<br>FEE                       |                     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |  |
| •                                | Total  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT         | Minus               | HIGHE<br>NUMBI<br>PREVIOL                      | ST<br>FR<br>ISLY                | PRESENT            | -                | TE :                    | FEE  | OR                  | RATE X\$18=             | TIONAL                 |  |  |
| AMENOMEN                         | Total<br>Independent   | CLAIMS REMAINING AFTER AMENDMENT                  | Minus               | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FO           | ST<br>ER<br>JSLY<br>DR          | PRESENT<br>EXTRA   | ×s               |                         | FEE  | t                   | X\$18=                  | TIONAL                 |  |  |
| AMENOMEN                         | Total<br>Independent   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT         | Minus               | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FO           | ST<br>ER<br>JSLY<br>DR          | PRESENT<br>EXTRA   | X\$              | 9=                      | FEE  | OR                  | X\$18=<br>X86=          | TIONAL                 |  |  |
| AMENOMEN                         | Total<br>Independent<br>FIRST PRESE                                      | CLAIMS REMAINING AFTER AMENDMENT  * NTATION OF MU | Minus<br>LTIPLE DEP | HIGHE NUMBI PREVIOU PAID FO                    | ST<br>ER<br>USLY<br>DR          | PRESENT<br>EXTRA   | X\$<br>X4<br>+14 | 9=<br>3=<br>15=         | FEE  | t                   | X\$18=<br>X86=<br>+290= | TIONAL                 |  |  |
| AMENUMEN!                        | Total Independent FIRST PRESEI the entry in countine "Highest Num        | CLAIMS REMAINING AFTER AMENDMENT                  | Minus LTIPLE DEP    | HIGHE NUMBI PREVIOU PAID FI                    | ST<br>EA<br>USLY<br>DR<br>CLAIM | PRESENT EXTRA      | X\$<br>X4<br>+14 | 9=<br>3=<br>15=<br>OTAL | FEE (  | OR<br>OR            | X\$18=<br>X86=          | TIONAL                 |  |  |

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10723975

| Ellective October 1, 2000  |  |  |               |                               |                     |  |   | 1010100             |                        |    |                     |                        |  |
|--|--|--|---------------|-------------------------------|---------------------|--|---|---------------------|------------------------|----|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |  |               |                               |                     |  |   | SMALL EN            |                        | OR | OTHER<br>SMALL E    |                        |  |
| TOTAL CLAIMS   |  |  |               |                               |                     |  |   | RATE                | FEE                    |    | RATE                | FEE                    |  |
| FOR .  |  |  | NUMBER FILED  |                               | NUMBER EXTRA        |  |   | BASIC FEE           | 385.00                 | OR | BASIC FEE           | 770.00                 |  |
| TC   | TAL CHARGEA  | BLE CLAIMS                                 | 768 minus 20= |                               | .748                |  |   | X\$ 9=              | .63                    | OR | X\$18=              |                        |  |
| INC  | EPENDENT CL  | AIMS                                       | minus 3 =     |                               |                     |  |   | X43=                | 43                     | OR | X86=                |                        |  |
| MU   | ILTIPLE DEPEN  | IDENT CLAIM PI                             | RESENT        |                               |                     |  |   | +145=               |                        | OR | +290=               |                        |  |
| * If the difference in column 1 is less than zero, enter   |  |  |               |                               | *0" in c            | olumn 2                                      |   | TOTAL               | 448                    | OR | TOTAL               |                        |  |
|  | C  | LAIMS AS A                                 | MENDED        | - PAR'<br>(Colur              |                     |  |   | SMALL ENTITY        |                        |    | OTHER<br>SMALL      |                        |  |
| AMENDMENT A  |  | CLAIMS REMAINING AFTER AMENDMENT           |               | HIGH<br>NUM<br>PREVIO         | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA                             |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| IDME   | Total  | . 768                                      | Minus         | - 7                           | <b>&gt;</b>         | =  |   | XS 9=               | 63                     | OR | X\$18=              |                        |  |
| MEN  | Independent  | •  | Minus         | ***                           |                     | =  |   | X43=                | 43                     | OR | X86=                |                        |  |
| _  | FIRST PRESE  | NTATION OF MI                              | JLTIPLE DEF   | PENDENT                       | CLAIM               |  | j | +145=               |                        | OR | +290=               |                        |  |
|  |  |  |               |                               |                     |  |   | <u></u>             | 14 8                   |    | TOTAL<br>ADDIT. FEE |                        |  |
| (Column 1) - (Column 2) (Column 3)   |  |  |               |                               |                     |  |   |                     |                        |    |                     |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |               | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA                             |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| MON  | Total  | •  | Minus         | **                            |                     | =  |   | XS 9=               |                        | OR | X\$18=              |                        |  |
| ME   | Independent  | *  | Minus         | ***                           |                     | <u>                                     </u> | 4 | X43=                |                        | OR | X86=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |               |                               |                     | <u> </u>                                     | L | +145=               |                        | OR | +290=               |                        |  |
| •  |  |  |               |                               |                     |  |   | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |  |               |                               |                     |  |   |                     |                        |    |                     |                        |  |
| <b>AMENDMENT C</b>   |  | CLAIMS-<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUM<br>PREVII<br>PAID | BER                 | PRESENT<br>EXTRA                             |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *  | Minus         | <b>ATR</b>                    |                     | =  |   | XS 9=               |                        | OR | X\$18=              |                        |  |
|  | Independent  | *  | Minus         | ***                           |                     | =  |   | X43=                |                        | OR | X86=                |                        |  |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |               |                               |                     |  | J | +145=               | ·                      | OR | +290=               |                        |  |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |  |               |                               |                     |  |   | TOTAL<br>ADDIT, FEE |                        | OÄ | TOTAL               |                        |  |
| ***  | ** If the "Highest Number Previously Phid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |               |                               |                     |  |   |                     |                        | j  | ADDIT. FEE          |                        |  |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column. 1. |  |  |               |                               |                     |  |   |                     |                        |    |                     |                        |  |